

# STATE OF DELAWARE Child Death, Near Death and Stillbirth Commission

## March 26, 2010

# **FINAL MINUTES**

Meeting Date and Time: March 26, 2010 1:00 PM

**Meeting Location**: Appoquinimink State Service Center

### **In Attendance**:

 Commissioners: Dr. Garret H.C. Colmorgen, Mr. Malcolm Cochran, Ms. Marjorie Hershberger, Dr. Kathy Janvier, Dr. Amanda Kay, Ms. Leslie Newman, Dr. Karyl Rattay, Ms. Mary Kate McLaughlin, Dr. David Paul, Dr. Kevin Sheahan, Dr. Philip Shlossman, Dr. Wendy Sturtz, Ms. Aleks Casper, Ms. Marie Renzi, and Dr. Lani Nelson-Zlupko

#### • Proxies:

Capt. John Evans (DSP), Mr. James Adams (DOJ), Judge Joelle Hitch, Mr. Nicholas Krayer (OCA), Rosie Morales (OCA), Ms. Bridget Buckaloo, and Ms. Alisa Olshefsky (DPH), and Ms. Cortney Jones (Wilmington CRT)

### • Staff:

Anne Pedrick, MS, Executive Director Ashlee Starratt, CDR Specialist Michael Brown, Office Manager Angela Birney, Records Technician Rachel Rosenwald, CDNDSC Intern

# Call to Order:

The meeting was called to order at 1:05 PM by Commission Chair, Dr. Garrett H.C. Colmorgen. A quorum was established with 17 members present.

## **OLD BUSINESS**

#### Minutes:

Upon a motion duly made and seconded, the minutes from January 22, 2010, were approved without change.

#### **NEW BUSINESS**

## **Executive Director Report**:

<u>Joint Conference</u>: On April 7, 2010 the announcement for the CPAC/CDNDSC Conference will be disseminated via email. It is imperative that registration be done immediately due to limited seating.

<u>AIC Mandatory Reporting Update:</u> Dr. Sheehan/Dr. Pillsbury, Dr. Kay, and Dr. Giddins will be the physician representatives for the Medical Mandatory Report training. There are 3 trainings scheduled for April and 2 trainings scheduled for June.

CDNDSC, OCA, and the DSCYF will be working on developing an ad campaign for Mandatory Reporting. The message must be uniform and have the capability to be replicated in various media venues. This initiative came out of the Children and Families First Blue Ribbon Day.

<u>National Child Death Center:</u> During the summer of 2009, the Commission was asked to write a letter of support for the National Child Death Center in order to support a grant, funded through the Centers for Disease Control which will look at the aggregate data on infant safe sleeping within 9 states. Delaware has been chosen to participate in this research initiative. Findings of this research will be released within 9-12 months.

<u>Crib for Kids</u>: In October, there will be a Crib for Kids Walk which will benefit the *Cribs for Kids* Program in Delaware. Monies raised will go directly into the *Cribs for Kids* fund through the National *Cribs for Kids*. Additionally, a link will be put on CDNDSC website and the Cribs for Kids website for donations.

<u>Infant Safe Sleeping:</u> Marj Hershberger will be updating the Joint Commissions in May on the work of the subcommittee.

<u>Kids Caucus:</u> The CDNDSC Executive Director reached out to Senator Bethany Hall-Long regarding the annual report. The response from the Kids Caucus is that at this point in time, there is no need for CDNDSC to present on the report. Senator Blevins has also read the report and was impressed with the information and layout of the report.

<u>Maternal Death Reviews:</u> Dr. Meena Ramakrishnan has been researching and organizing data based on other states' programs. A plan will be drafted by this summer and the goal is to implement the program in the fall.

<u>CPAC/CDNDSC Medical Subcommittee:</u> Dr. Amanda Kay proposed the establishment of a joint Medical Subcommittee in order to (1) look at the quantity and quality of health care delivery within Delaware's foster care system and (2) the adequacy of timeliness and completeness of evaluations, the comprehensive assessment of complex health issues and continuity of care and information. If established, the subcommittee hopes to evaluate the current medical health care structure within foster care and make recommendations on how medical care delivery within the foster care system can better meet the needs of children and teens.

It has become clear that an evaluation of the current medical care system working within Delaware foster care needs to begin as evidence by system failures, as identified in the Child Abuse and Neglect Panel, and by physician concerns brought to the Division of Family Services (DFS). DFS was unaware that the current system did not meet the American Academy of Pediatrics (AAP) standards. The AAP standards are designed to help professionals from all disciplines understand the complexity of health issues with which children in foster care may present with and emphasize the need for coordinated and collaborative care. Fundamental principles such as being seen early, being seen often, and having an enhanced health care schedule are critical for a child's health. Currently, Delaware is not meeting the standards as put forth by the AAP. Furthermore, placements in foster care presents multiple barriers such as a lack of a medical home, lack of records, lack of an accurate medical history, lack of resources, poor coordination, and following through on identified needs.

Upon a motion duly made and seconded the establishment of the Joint Medical Subcommittee was approved by the Commission.

<u>Federal Pool and Spa Safety Act:</u> The Pool and Spa Safety Act was passed in 2008 with a focus on entrapment. Further review of pool and spa safety revealed that Delaware laws are not consistent with federal laws. The Drowning Prevention Coalition of Delaware has begun to work on making public pools and spas safe across the state. The Consumer Product Safety Commission is approaching the Attorney General's office to support the amendment of Delaware's law to reflect the requirements of the federal law.

Upon a motion duly made and seconded the Commission supports the Delaware's Drowning Prevention Coalition chaired by Jennifer Whaley.

#### **Other Business:**

No other business was discussed.

## **Public Comment:**

There was no public comment.

Upon a motion duly made and seconded, it was unanimously decided to enter Executive Session.

Upon return to public session, a motion was duly made and seconded and unanimously approved to adjourn at 4:00 pm.